Texas Birth Defects Monitoring Division, Texas Department of Health

OBTAINING DATA
FROM THE TEXAS BIRTH DEFECTS REGISTRY:
POLICY AND REQUEST PROCEDURES

ONLINE RESOURCES

The interactive web site at Texas Health Data will provide many tabulations of data from the Texas Birth Defects Registry at http://soupfin.tdh.state.tx.us/. If that does not meet your needs, feel free to request data from the Texas Birth Defects Monitoring Division through this document, which can also be obtained online at http://www.tdh.texas.gov/tbdmd/access_pol.htm

BRIEF DESCRIPTION OF THE REGISTRY

DATA COLLECTION

The Texas Birth Defects Registry is a population-based registry which collects statewide data on pregnancies affected by birth defects. It is run by the Texas Birth Defects Monitoring Division (TBDMD). We would appreciate your cooperation by giving the Texas Birth Defects Monitoring Division, Texas Department of Health credit as the source for data in reports or other products.

The Registry is based upon active surveillance. This means it does not require reporting by hospitals or medical professionals. Instead, trained program staff members regularly visit medical facilities where they have the authority to review log books, hospital discharge lists, and other records. From this review, a list of potential cases is created. Program staff then review medical charts for each potential case identified. If the infant or fetus has a birth defect covered by the registry, detailed demographic and diagnostic information is abstracted. That information is entered into the computer and submitted for processing into the registry. Quality control procedures for finding cases, abstracting information, and coding defects help ensure completeness and accuracy.

Records based on abstracted medical information are matched to vital records (such as birth certificates and fetal death certificates) filed with the Texas Bureau of Vital Statistics. Sometimes information on the same field is found in both medical records and vital records. We then store the data from both those sources as well as what we feel is an optimum combination. For many pieces of demographic data, the information from vital records is used (i.e. takes priority) but if that is missing, then the information from medical records is used. The combination rule for each field is presented in Form E. Note that all diagnostic information is abstracted only from medical records.
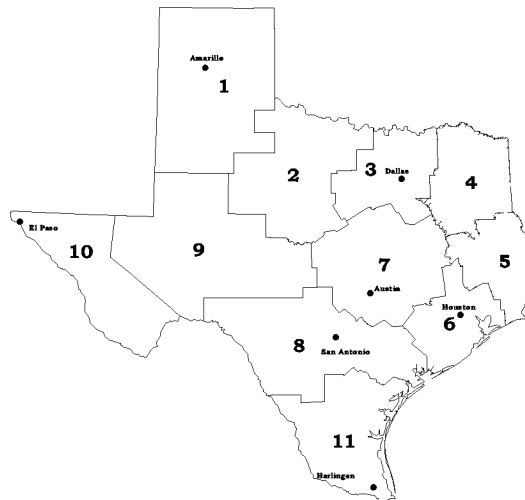
CASE DEFINITION

A case is an infant or fetus with a birth defect. To be included as a case in the Texas Birth Defects Registry, all of the following criteria must be met:
- The mother's residence at the time of delivery must be in an area covered by the registry (see below).
- The infant or fetus must have a structural birth defect or developmental disability monitored by the registry.
- The defect must be diagnosed prenatally or within one year after delivery. This is extended to six years of age for special cases, currently only for fetal alcohol syndrome.

The current case definition includes all pregnancy outcomes (live births, spontaneous fetal deaths, and induced pregnancy terminations) at all lengths of gestation. Prior to April 5, 2001, when the current case definition was adopted, the registry did not collect information on birth defects among fetal deaths before 20 weeks gestation.

REGISTRY COVERAGE AND CHANGES

The Texas Birth Defects Registry ascertained cases from the above Public Health Regions for the shaded time periods shown below:

Region	Year in which case was delivered			
	1996	**1997**	**1998**	**1999 and later**
01			▓	▓
02		▓	▓	▓
03		▓	▓	▓
04			▓ (partial)	▓
05			▓ (partial)	▓
06	▓			▓
07			▓	▓
08		▓	▓	▓
09		▓	▓	▓
10		▓	▓	▓
11	▓	▓	▓	▓

The TBDMD tries to continually improve Registry operations, for example by changing case definition, birth defect codes, and data collection procedures as needed. We then try to go back and apply such changes to all relevant cases in the Registry (e.g. updating codes for all cases with that birth defect). However, if a data user has questions about historical case definitions, codes, or procedures, please contact Dan Driggers at 512-458-7232.

We implemented our new data collection software on 2/1/2002. If a case was abstracted before that time (affecting most cases delivered before 2001), several fields are likely to have null values, and other fields have values but were collected under different rules and definitions; all those fields so should be analyzed with care. Both kinds of fields are indicated in Form E.

GAINING ACCESS TO DATA IN THE BIRTH DEFECTS REGISTRY

The Registry includes some data items which could identify a case, parents of a case, or an institution. These data items are:
- Name
- Newborn screening number
- Medical record number
- Vital records number
- Social security number
- Facilities of delivery, diagnosis, or treatment
- Address information including geocoded location
- Telephone numbers.

It is important that confidentiality be protected when researchers and others make use of the data, so additional review is required when any of those items are requested (described in (4) below).

Data from the Birth Defects Registry can be obtained in the following four ways. In filling out all listed forms, feel free to use a word processor on the downloaded form itself.

1. PUBLISHED TABULATED DATA

This includes numbers of cases and rates of 49 birth defects broken down by:
- Maternal age
- Maternal race/ethnic group
- Infant/fetus sex
- Public health region, or
- County of mother's residence at delivery

These reports are available in Texas Department of Health publications, by calling us at 512-458-7232, or on our web site at www.tdh.state.tx.us/tbdmd/index.htm.

2. UNPUBLISHED DATA WITHOUT IDENTIFYING INFORMATION, IN TABULAR OR AGGREGATED FORMAT

Complete the following forms and send them to: Lisa Marengo, Texas Birth Defects Monitoring Division, Texas Department of Health, 1100 West 49th Street, Austin, TX 78756-3180. Alternatively, the information contained in those forms may be communicated by e-mail to lisa.marengo@tdh.state.tx.us or by phone to Ms. Marengo at 512-458-7232.

☐ A. Request for Unpublished Birth Defects Registry Data

☐ B. Request for Statistics, Tabulations, or Aggregated Data

Form E, Request for Variables / Data Fields, may be used as a reference.

In some situations, the number of cases may be so few that identification of individuals is considered possible. In that case, the TBDMD reserves the right to suppress data in certain cells or to require a data requestor to follow the process outlined in (4).

3. UNPUBLISHED DATA WITHOUT IDENTIFYING INFORMATION, IN INDIVIDUAL RECORD FORMAT

Complete the following forms and send them to: Lisa Marengo, Texas Birth Defects Monitoring Division, Texas Department of Health, 1100 West 49th Street, Austin, TX 78756-3180. Alternatively, the information contained in those forms may be communicated by e-mail to lisa.marengo@tdh.state.tx.us or by phone to Ms. Marengo at 512-458-7232.

☐ A. Request for Unpublished Birth Defects Registry Data

☐ C. Agreement for Use of Non-identifying Birth Defects Registry Data in Individual Record Format

☐ E. Request for Variables / Data Fields

In some situations, the number of cases may be so few that identification of individuals is considered possible. In that case, the TBDMD reserves the right to require a data requestor to follow the process outlined in (4).

4. UNPUBLISHED DATA WITH IDENTIFYING INFORMATION, IN INDIVIDUAL RECORD FORMAT

Complete the following forms.

☐ A. Request for Unpublished Birth Defects Registry Data

☐ D. Agreement for Use of Identifying Birth Defects Registry Data

☐ E. Request for Variables / Data Fields

☐ (optional) F. Request for Vital Records Numbers of Birth Defects Registry Cases

Submit a proposal describing the study for which these data will be used. The proposal should include the following.
- Brief literature review and justification for the study
- Study objectives and study design
- Population (time period of delivery and geographic area)
- Birth defects of interest and exposures (independent variables) of interest
- Methods for any further data collection or linkage if applicable (be specific). Will contact be made with any individual or institution identified from the requested data? If yes, describe.
- Methods for data analysis. Include power or sample size calculations.
- Estimated completion date for the study
- Describe specific steps you will take to keep the data confidential

Obtain an application for the Texas Department of Health Institutional Review Board (TDH IRB) by contacting Steven Lowenstein at 1-888-777-5037 (toll free) or 1-512-458-7111 ext 2202, or by downloading from the TDH IRB website at www.tdh.state.tx.us/irb. Complete the application.

Collate the following information:
☐ completed forms
☐ proposal
☐ completed TDH IRB application.
Send them to: Lisa Marengo, Texas Birth Defects Monitoring Division, Texas Department of Health, 1100 West 49th Street, Austin, TX 78756-3180. The deadline for arrival at the TBDMD is the second to the last working day of each month, so that we can fit the request into the TDH IRB schedule. Alternatively, you can send the TDH IRB application and proposal directly to the TDH IRB, and the completed forms and proposal to Ms. Marengo.

These materials will be reviewed by both:
- The Texas Birth Defects Monitoring Division (mainly to check for scientific merit);
- The TDH IRB (mainly to check for ethics and protection of human subjects).
Once all required approval has been obtained, a researcher is considered to have established a "valid scientific interest" as required in the law establishing the Texas Birth Defects Registry.

FEES

The Texas Birth Defects Monitoring Division is committed to providing accurate, complete, and timely birth defects data for use in the research and prevention of birth defects. Whenever possible, data and reports will be supplied at no cost to the public. However, in certain circumstances such as very time-consuming requests, the TBDMD will charge a fee for data or reports according to TDH operating policy AA-5007.

VIOLATIONS OF THE TERMS OF THE AGREEMENTS

If any terms of the agreements in this policy are violated, the Director of the TBDMD may request immediate termination of the study in progress, may deny future access to Texas Birth Defects Registry data, and may confiscate any Birth Defects Registry data in possession of the requestor. The remedies specified in this provision are in addition to any other remedies provided by law for the benefit of the Texas Department of Health or other persons.

SUGGESTIONS ON IMPROVING THIS DOCUMENT

Suggestions are welcome from data users on how to improve any aspect of this document (description of the Registry, policy, forms, etc.). Please send suggestions by e-mail to peter.langlois@tdh.state.tx.us.

I:\data requests\access policy and procedures\access policy.doc

Form A

Texas Birth Defects Monitoring Division
Texas Department of Health

REQUEST FOR UNPUBLISHED BIRTH DEFECTS REGISTRY DATA

IDENTIFICATION

Today's date:

Your name and university degrees:

Your title:

Your daytime phone number:

Your fax number:

Your e-mail address:

Your agency, institution, or firm and physical mailing address:

Name of agency, institution, or firm requesting the data (if not included above):

Address of agency, institution, or firm requesting the data (if not included above):

Purpose for which the requested data will be used:

If you are a student, also complete the following identification regarding your primary academic advisor or teacher.

Name and university degrees:

Title:

Daytime phone number:

Fax number:

E-mail address:

Physical mailing address:

TYPE OF DATA YOU ARE REQUESTING *(Check one)*

☐ Data **without** identifying information, in aggregated/tabular format

☐ Data **without** identifying information, in individual record format

☐ Data **with** identifying information, in individual record format

SELECTION CRITERIA

We will select Registry records that meet the following criteria.

Dates of Delivery
The earliest date of delivery available is January 1, 1996. For more information, see page 2 of the policy. You can request data up to and including data released in the most recent published data report.
(Check one and specify if needed.)
☐ All data available
☐ Data within the following start and finish dates *(specify):*

Geographic Area (based on mother's residence at delivery)
The Texas Birth Defects Registry began with the Houston/Galveston area (Public Health Region 6) and South Texas (Public Health Region 11). It gradually expanded so that beginning with deliveries on January 1, 1999, the entire State was covered. For more information, see page 2 of the policy.
(Check one and specify if needed.)
☐ All data available
☐ Data from the following geographic area(s) *(specify):*

Birth Defect Diagnoses To Use In Selecting Cases
(Indicate both description and codes. Attach separate page if necessary.)

Verbal label or description of birth defect(s)	ICD-9 or BPA code(s)

Other Selection Criteria
These may include for example, pregnancy outcome, birth weight, etc. Form E may be used as a reference.
(Check one and specify if needed.)
☐ No further selection criteria desired.
☐ Please further select records that meet the following criteria *(specify):*

FURTHER DETAILS ON DIAGNOSIS DATA

Possible/Probable Diagnoses
Routine data reports and analyses from the Texas Birth Defects Registry only include definite diagnoses. However, a small percentage of our cases have possible/probable diagnoses.
(Check one.)
☐ Only definite diagnoses. (Default value)
☐ Both definite and possible/probable diagnoses. (Note: there is a variable that
    identifies which diagnoses are considered possible/probable.)

Cases With Multiple Birth Defect Diagnoses
ONLY FOR REQUESTS FOR DATA IN INDIVIDUAL RECORD FORMAT: We will select all cases with one or more of the birth defects you listed in the table above (Birth Defect Diagnoses To Use In Selecting Cases), and that meet your other selection criteria. However, some cases will also have other birth defects not included in that list. Do you want those?
(Check one.)
☐ Yes; send all defect diagnoses for the selected cases. (Default value)
☐ No; send only the defects listed in the table "Birth Defect Diagnoses To Use In
    Selecting Cases" above.

INFORMATION FORMAT CHARACTERISTICS

Physical Format
(Please check the desired format for receiving the information from us. If you can accept multiple formats, please indicated with a '1' your most preferred format, with a '2' your next most desired format, etc. This will help us quickly identify other options in case your highest preference will not work.)

Check, or indicate preference number	Options
	Paper tables or lists, sent by US mail
	Electronic file sent by file transfer protocol (FTP)
	Electronic file sent as an e-mail attachment (encrypted if confidential information is included)
	3.5" diskette formatted on a PC compatible computer
	Zip disk
	Compact disk

File Type
(Please check the desired format for receiving the information from us. If you can accept multiple formats, please indicated with a '1' your most preferred format, with a '2' your next most desired format, etc. This will help us quickly identify other options in case your highest preference will not work.)

Check, or indicate preference number	Options	Most Recent Version You Can Read
	Microsoft Access database	
	Microsoft Excel spreadsheet	
	SAS data file	
	ASCII (text) file	No version needed
	Not applicable (requesting paper output)	No version needed

Form B

REQUEST FOR STATISTICS, TABULATIONS, OR AGGREGATED DATA

Statistics

Data may be summarized in a variety of ways. *(Check one or more of the following; these will be reported for each level of the breakdown you request or each cell of the cross tabulation.)*

☐ Number of cases
☐ Rates (number of cases per 10,000 live births)
☐ 95% confidence intervals for rates
☐ Denominators for rates (live births)

Breakdowns or Cross Tabulations

Tables may be broken down in a variety of ways. Please note that the more ways you request, the more time it may take us to fulfill your request. The most common variables used to break down a table or cross tabulate are:

- Birth defect (recommended)
- Time period of delivery (e.g. year)
- Geographic area of maternal residence at delivery (e.g. public health region, county)
- Demographic characteristics (e.g. maternal age, maternal race/ethnic group)

Notes:

- One-way breakdowns produce a tabulation using one variable (e.g. by birth defect). Cross tabulations or multi-way breakdowns use two or more variables (e.g. birth defect by year).
- A single cross tabulation of many variables can quickly produce a huge amount of statistical data. Example: routinely reported birth defect (49 values) by year (1996-1999 = 4 values) by maternal age group (6 values) would produce 49 x 4 x 6 = 1,176 cells.
- Similarly, some variables (e.g. county) have many possible values (there are 254 counties in Texas). Cross tabulations involving them can quickly produce a huge amount of statistical data. Example: a breakdown of our routinely reported birth defects by county would produce 49 x 254 = 12,446 cells.
- If you use 95% confidence intervals for your estimates or alpha values of 0.05 for hypothesis testing, then 5% of your comparisons will be statistically significant by chance. That can make breakdowns with many cells problematic; e.g. 5% of 12,446 cells = 622 results that will be significant by chance.
- If you have questions or want to discuss possible approaches, contact Lisa Marengo at the Texas Birth Defects Monitoring Division 512-458-7232.

Specify the breakdown(s) or cross tabulation(s) you would like:

Form C
Texas Birth Defects Monitoring Division
Texas Department of Health

AGREEMENT FOR USE OF NON-IDENTIFYING BIRTH DEFECTS REGISTRY DATA IN INDIVIDUAL RECORD FORMAT

Instructions: *This agreement must be read, signed, and returned by each person who will have access to Birth Defects Registry data in individual record format. Data requestors: please copy and distribute this statement to all people who will have access to the data you request, then collect and return the signed statements.*

Maintaining the confidentiality of information in the Texas Birth Defects Registry is mandated by law and is the highest priority of Registry operations. All research results will be presented/published in a manner which ensures that no individual can be identified. In addition, there should be no attempt to identify individuals from any computer file, nor to link with a computer file containing patient identifiers.

In order for the Texas Birth Defects Monitoring Division (TBDMD) to provide data to you, it is necessary that you agree to the following provisions.
1. You will not use nor permit others to use the data in any way other than for analysis and reporting of aggregated results.
2. You will not make the data available nor permit others to make the data available to any person or organization except with the written approval of the TBDMD, and controls shall be maintained to prevent unauthorized access.
3. You will not present/publish data in which an individual or institution can be identified.
4. You will not attempt to link nor permit others to link the data with individually identified records in another database.
5. You will not attempt to learn the identity of any person whose data are contained in the supplied file(s).
6. If the identity of any person is discovered inadvertently, the following will be done:
   a. You will not make use of this knowledge;
   b. You will notify the TBDMD of the incident;
   c. You will not inform anyone else of the discovered identity.
7. You will credit the Texas Birth Defects Monitoring Division, Texas Department of Health, as the source of the data.
8. You will send a copy of the finished product (e.g. report, thesis, dissertation, or paper) to the TBDMD.

My signature indicates that I agree to comply with the above stated provisions.

_____   _____
Signature   *Date*

_____
Name (printed or typed)

Form D

AGREEMENT FOR USE
OF IDENTIFYING BIRTH DEFECTS REGISTRY DATA

Instructions: *This agreement must be read, signed, and returned by each person who will have access to any confidential/identifying Birth Defects Registry data. Data requestors: please copy and distribute this statement to all people who will have access to the data you request, then collect and return the signed statements.*

Maintaining the confidentiality of information in the Texas Birth Defects Registry is mandated by law and is the highest priority of Registry operations. All research results will be presented/published in a manner which ensures that no individual can be identified.

In order for the Texas Birth Defects Monitoring Division (TBDMD) to provide data with identifying information for this study, it is necessary that you agree to the following provisions.
1. You will not use nor permit others to use the data for any purpose other than that specifically set forth in your submitted request.*
2. You will not make the data available nor permit others to make the data available to any person or organization except with the written approval of the TBDMD, and controls shall be maintained to prevent unauthorized access.*
3. You will not present/publish data in which an individual or institution can be identified.
4. You will treat all Registry data as strictly confidential.*
5. Any confidential information which is copied or otherwise transferred, electronically or through other means, shall be destroyed at the completion of the research unless otherwise stated in the research protocol.
6. You will credit the Texas Birth Defects Monitoring Division, Texas Department of Health, as the source of the data.
7. You will send a copy of the finished product (e.g. report, thesis, dissertation, or paper) to the TBDMD.
   * Federal agencies which are subject to the federal Freedom of Information Act and the Federal Privacy Act shall not release confidential identifying data except as is required by those Acts.

My signature indicates that I agree to comply with the above stated provisions.

_____   _____

Signature   *Date*

_____

Name (printed or typed)

Form E
Texas Birth Defects Monitoring Division
Texas Department of Health

REQUEST FOR VARIABLES / DATA FIELDS

You may use this list to develop your own list, or you can check below and return this form with the other required information. Terms in square brackets illustrate some possible responses, for clarification. More detail on what each variable means and valid responses can be obtained through Lisa Marengo, TBDMD (phone 512-458-7232).

Variables in italics are considered to be identifying data. If you request any of those variables, you must go through the process for requesting identifying data, described in approach (4); the variables must correspond to the proposal you submit.

Items Collected From Both Medical Records and Vital Records
Under "Comments": D = derived from combined medical records and vital records data
G = address from medical records geocoded only if no vital records address was found
Under "Combination": M = medical records
V = vital records
If the cell is filled in, data are not available from that source.

Variable/Field Name	Comments	Combination: Priority Source	Source You Want Data From: Medical	Vital	Combined
Identification Information					
Infant's most current last name		V			
Infant's most current first name		V			
Infant's sex	see *	see *			
Infant's birth weight		M			
Date of delivery		V			
Year of infant's date of delivery	D	V			
Pregnancy outcome [live birth, spontaneous fetal death, induced termination]		M			
Facility where delivery occurred		M			
Demography and Contacts					
Birth mother's first name		V			
Birth mother's date of birth		V			
Birth mother's age (years)	D	V			
Birth mother's age group (6 5-yr groups)	D	V			
Birth mother's race		V			
Birth mother Hispanic [yes/no]		V			
Birth mother's race/ethnicity	D	V			
Birth mother's residence at delivery: Street / P.O Box		V			
Birth mother's residence at delivery: City		V			
Birth mother's residence at delivery: County		V			
Birth mother's residence at delivery: County on border with Mexico	D	V			
Birth mother's residence at delivery: Public health region	D	V			
Birth mother's residence at delivery: State		V			
Birth mother's residence at delivery: Zip code		V			
Birth mother's residence at delivery: latitude	G	V			
Birth mother's residence at delivery: longitude	G	V			

Variable/Field Name	Comments	Combination: Priority Source	Source You Want Data From:		
			Medical	Vital	Combined
Birth mother's residence at delivery: census tract 1990	G	V			
Birth mother's residence at delivery: census tract 2000	G	V			
Birth mother's residence at delivery: geocoding accuracy (simplified)	G	V			
Father's last name		V			
Father's first name		V			
Death Information					
Liveborn infant reported to have died		V			
Date of death		V			

* Infant sex: If medical records indicate infant sex is ambiguous, the combined sex variable is set to "ambiguous". Otherwise, the sex indicated in vital records takes priority for the combined variable.

Items Collected Only From Vital Records

Variable/Field Name	Check If Desired
Demography and Contacts	
Birth mother's maiden name	
Birth mother's birthplace	
Birth mother's Hispanic origin [e.g. Mexican, Central/South American, Cuban]	
Birth mother's education	
Father's date of birth	
Father's birthplace	
Father's race	
Father Hispanic [yes/no]	
Father's Hispanic origin [e.g. Mexican, Central/South American, Cuban]	
Father's education	
Vital Records Certificate Numbers	
Birth certificate file number	
Fetal death certificate file number	
Death certificate file number	

Items Collected Only From Medical Records
Under "Comments":   M = old cases (most delivered before 2001) are Missing data for this field
A = old cases have data for this field Available, but follow old definitions

Variable/Field Name	Comments	Check If Desired
Identification Information		
Case number		
Infant's most current last name suffix	M	
Infant's most current middle name		
Infant's other last name	M	
Infant's other last name suffix	M	
Infant's other first name	M	
Infant's other middle name	M	
Infant's newborn screening number		
Data Sources and Facility Information		
Facility (code and name)		
Medical record location [department or clinic within a facility]		
Medical record number		
Medical record of [infant, mother, both]		
Final results (of chart review or abstraction)	M	
Demography and Contacts		
Birth mother's last name		
Birth mother's middle name		

Variable/Field Name	Comments	Check If Desired
Birth mother's social security number		
Birth mother's most recent mailing address: Street / P.O. Box	M	
Birth mother's most recent mailing address: City	M	
Birth mother's most recent mailing address: State	M	
Birth mother's most recent mailing address: Zip code	M	
Birth mother's most recent mailing address: Nation	M	
Birth mother's home phone number		
Birth mother's other phone number		
Father's home phone number	M	
Father's other phone number	M	
Child living with: Relationship to child code	A	
Child living with: Last name	A	
Child living with: First name	A	
Child living with most recent mailing address: Street / P.O. Box	A	
Child living with most recent mailing address: City	A	
Child living with most recent mailing address: State	A	
Child living with most recent mailing address: Zip code	A	
Child living with most recent mailing address: Nation	A	
Child living with: phone number	A	
Other contact's last name	A	
Other contact's first name	A	
Other contact's phone number	A	
Pregnancy History		
Total pregnancies		
Live births		
Spontaneous fetal deaths		
Induced terminations of pregnancy		
Unspecified fetal deaths / pregnancy terminations		
Indication of multiple gestation pregnancies	M	
Infant deaths		
Maternal Illnesses, Conditions, or Complications		
Maternal illness, condition, or complication	A	
Present before this pregnancy	A	
Present during this pregnancy	A	
Family History of Birth Defects		
Relationship to child	A	
Family member's birth defect	A	
Maternal Exposures		
Maternal exposures	A	
Quantity, frequency, and timing of alcohol use	M	
Prenatal Care		
Mother received prenatal care	M	
Prenatal Procedures and Tests		
Prenatal procedure		
Prenatal lab test		
Date prenatal procedure performed		
Facility (where prenatal procedure/test results are found)		
Prenatal procedure/test results not found	M	
Prenatal procedure/test results and interpretation		
Gestational Age		
Date of last menstrual period (LMP)		
Estimated date of delivery by LMP		

Variable/Field Name	Comments	Check If Desired
Gestational age at delivery by LMP	M	
Date of ultrasound		
Gestational age at time of ultrasound		
Estimated date of delivery by ultrasound	M	
Gestational age at delivery based on ultrasound	M	
Estimated date of delivery by unknown source	M	
Gestational age at delivery by unknown source	M	
Gestational age at delivery by clinical exam		
Delivery Information		
Apgar (1 minute)		
Apgar (5 minute)		
Plurality [singleton, twins, etc.]		
Birth weight		
Head circumference		
Length		
Infant/Fetal Complications		
Infant/fetal complication [chosen from specified list]	A	
Other infant/fetal complications [open text]	A	
Postnatal Procedures		
Postnatal procedure		
Postnatal procedure (specify other)		
Postnatal procedure: specialty of person making the diagnosis		
Date postnatal procedure performed		
Facility where postnatal procedure results are found		
Postnatal procedure results not found	M	
Postnatal procedure results and interpretation		
Birth Defect Information		
Birth defect description		
BPA code		
Laterality		
Possible/probable		

Form F

REQUEST FOR VITAL RECORDS NUMBERS
OF BIRTH DEFECTS REGISTRY CASES

This form is typically used by researchers who want to use vital records to select control subjects who are not in the Birth Defects Registry. It allows Registry staff to send the researcher a list of vital record numbers (e.g. birth certificate numbers, fetal death certificate numbers) that we have matched to Birth Defects Registry cases.

Maintaining the confidentiality of information in the Texas Birth Defects Registry is mandated by law and is the highest priority of Registry operations. Consequently, all provisions to protect confidentiality that you agreed to in form D also cover these data.

SELECTION CRITERIA

We will select Registry records that meet the following criteria. They should agree with corresponding criteria used for selecting cases so that your cases and controls come from the same population.

Dates of Delivery
The earliest date of delivery available is January 1, 1996. For more information, see page 2 of the policy. You can request data up to and including data released in the most recent published data report.
(Check one and specify if needed.)
☐ All data available
☐ Data within the following start and finish dates *(specify):*

Geographic Area (based on mother's residence at delivery)
The Texas Birth Defects Registry began with the Houston/Galveston area (Public Health Region 6) and South Texas (Public Health Region 11). It gradually expanded so that beginning with deliveries in January 1, 1999, the entire State was covered. For more information, see page 2 of the policy.
(Check one and specify if needed.)
☐ All data available
☐ Data from the following geographic area(s) *(specify):*